SUPPLEMENT TO THE

BRITISH MEDICAL JOURNAL

LONDON SATURDAY AUGUST 10 1946

PROCEEDINGS OF COUNCIL

Tuesday, July 23

A meeting of the Council of the Association was held on Tuesday, July 23, immediately preceding the Annual Representative Meeting. Dr. H. Guy Dain was in the chair.

The Chairman said that during the previous week the death had occurred of one of the great figures in the Association. Sir Ernest Kaye Le Fleming had been associated for more than twenty years with the Association's central work in one capacity or another. He was Chairman of the Representative Body, 1931–4, and Chairman of Council, 1934–9. He was a most worthy successor in the line of extraordinarily able Chairmen who had immediately preceded him—J. A. Macdonald, Robert Bolam, and Henry Brackenbury—a line of which any organization might be proud. The members of Council expressed their sense of grief and loss and their sympathy with Lady Le Fleming and her family by standing in silence.

It was decided that a special Council meeting should be held in the early autumn for the consideration of the National Health Service Bill in its final stage in the light of the views of the profession, as expressed at the Annual Representative Meeting and in resolutions on the present agenda, and to determine future action.

Dr. O. C. Carter, chairman of the Journal Committee, presented recommendations for an increase in the editorial staff of the *British Medical Journal*, and these were approved. The Council also accepted proposals of the Staffing Committee that Dr. G. W. M. Findlay and Dr. S. S. B. Gilder be appointed editor and assistant editor respectively of the Abstracting Service, and that Dr. E. G. Murphy and Dr. D. Swinscow be appointed sub-editors of the *British Medical Journal*.

Dr. J. A. Pridham, chairman of the Organization Committee, presented the proposals concerning South African affiliation which on the following day were placed before the Representative Body and accepted (*Supplement*, August 3, p. 41). The Organization Committee was instructed to prepare the necessary amendments of articles and by-laws to provide for the new class of affiliated membership. It was agreed to inform the Federal Council in South Africa that the Council welcomed the proposal to appoint an observer to attend meetings of the Federal Council. Dr. Pridham also presented the report of the International Relations Committee and proposed that a sum of £1,000 be placed at the disposal of the committee for the session 1946–7 for the purpose of assisting selected British medical practitioners of high standing to give "B.M.A. Lectures" to the profession in various European countries. This was agreed to.

Psychiatry and the Law

Dr. R. G. Gordon presented a report by the Committee on Psychiatry and the Law—a joint committee of the B.M.A. and the Magistrates' Association, with observers from the Home Office, Ministry of Education, and Board of Control. The Criminal Justice Bill, which was introduced into Parliament in 1938 but not proceeded with, is likely to be reintroduced next session, and the committee made recommendations for its amendment, for transmission to the Home Office.

Dr. James Fenton dissented from a proposed amendment concerning offenders on probation or remand whose mental condition was considered to be such as required medical examination and might be susceptible to treatment. It was proposed in the original Bill that such treatment should be by or under the direction of a duly qualified medical practitioner, but the committee wished to add the words "with experience of psychological medicine." Dr. Fenton considered that the addition of such words would create another example of the sectionalizing of the profession. They would all admit, he said, that whatever the branch of medicine concerned, no one could have too much experience; but that was very different from translating the requirement into an Act of Parliament. If this kind of thing went on—another example was the attitude of the Royal College of Obstetricians and Gynaecologists to the practice of midwifery by general practitioners—it would mean that after a man had spent six or seven years in studying medicine and had become qualified he would not be considered capable of practising without some further special qualification.

Dr. Gordon said that he fully appreciated the objection, but the Magistrates' Association—the other half of the committee—was very keen on this point. It was not a question of treatment but of giving expert opinion. He could not accept the responsibility of altering the recommendation without referring it back. It was agreed that this proposal, that the medical practitioner must have "experience of psychological medicine," should be withdrawn from the general body of the recommendations.

Assistance for Ex-Service Practitioners

Dr. Martin Brodie introduced a report by the Ex-Service Practitioners Committee. Attention had been drawn, he said, to the considerable number of temporarily registered practitioners who were holding hospital posts which might otherwise be available for ex-Service practitioners. The committee felt that the time had come when alien practitioners should be called upon to vacate their hospital appointments in order to expedite the absorption of ex-Service practitioners eligible for the more senior posts under the Government's postgraduate scheme.

It was agreed that representations should be made to the Ministry of Health that a greater number of Class III hospital posts be authorized to expedite the absorption of such practitioners; that the present restriction whereby only those ex-Service practitioners who could prove intention to specialize before recruitment to the Forces and were not established either in general or special practice were eligible for Class III appointments should be removed; and that Class III appointments should be open to ex-Service practitioners who had made progress in the direction of specialism during their service with the Forces.

The principal discussion centred round a recommendation that hospital appointments now held by practitioners who have not served with the Forces, including alien practitioners, should be re-advertised as soon as legally possible. Dr. R. G. Gordon suggested that after "Forces" the words "and who are not liable to do so" should be inserted, otherwise the hospitals were being asked to re-advertise the posts of practically all the staff who had not actually served in the Forces.

It was explained that the hospital appointments which it was suggested should be re-advertised were almost entirely "B 1" appointments. The proposal was not intended to cover visiting staffs. On this point Col. A. H. Proctor pointed out that a good many of these "B 1" appointments were in small hospitals which did not offer to the ex-Service practitioner the opportunities he wanted. The suggestion was made that the matter was covered by the Central Medical War Committee.

The Secretary explained that recruitable cases were constantly being examined by the Central Medical War Committee, but a substantial proportion of the jobs now under consideration were held by men who were ineligible for service on medical grounds and by alien practitioners.

Eventually the resolution was accepted in the following form:

That senior hospital appointments, including "B 1" appointments, which have been held by their present occupants for two years or more, including those held by alien practitioners, should be re-advertised as soon as the relevant contract or agreement permits in order that demobilized practitioners may have an opportunity of applying for them, and that a communication be addressed to all hospitals urging that this step be taken.

It was further agreed to draw the attention of hospitals to the fact that there are now full specialists available for appointment to hospital staffs, and that it would be both in the hospitals' and in the national interest to review the staffing position now with a view to restoring it at least to the 1939 level and to increase the hospital establishments where possible. Dr. Carter pointed out that it would be a serious matter for part-time staffs, who would be squeezed out if hospitals were encouraged to increase their staff beyond the 1939 level, but an amendment to leave out those words was not carried. The committee had prepared an appendix setting out the problems of the ex-Service practitioner and the way in which they might be met. On certain points, including the present value of practices in terms of years' purchase, the committee undertook to look at the appendix again, after which it would be referred for office staff use in advising inquirers.

Some months ago the Council decided to withdraw its recommendation that medical appointments should continue to be made on a temporary basis. The question now arose whether the time had not come to discontinue the practice of insisting that, in advertisements of permanent medical appointments, two months should be allowed for the receipt of applications. Mr. Newell, chairman of the Hospitals Committee, recommended that this requirement be withdrawn, and that in future the Association should not insist on any minimum period for the purpose, and this was agreed to.

Other Committees

Mr. Dickson Wright reported that the committee charged with the consideration of the composition and procedure of the General Medical Council had held two meetings and had deliberated on the method of dealing with penal cases—a very absorbing and intricate subject. It had been greatly helped by the two defence societies which had prepared a memorandum (*Journal*, July 6, p. 21). The committee had not yet arrived at any finality in its decisions.

Dr. H. R. Frederick presented a report of the Welsh Committee, with a memorandum by Dr. D. B. Evans on hospital services in North Wales. He said that the committee had discussed the position of Wales in relation to the administrative proposals in the National Health Service Bill and had reaffirmed the resolution of the Special Representative Meeting, 1945, that Wales should be represented on the Central Health Services Council and the Medical Advisory Committee. The committee considered also that Wales should be administered as a region based on the Welsh National School of Medicine, but that satisfactory interim arrangements should be made in respect of areas more readily linked with university centres in England.

A report by the chairman of the Public Health Committee on the salaries of whole-time medical officers employed at mental hospitals and mental deficiency institutions, which roughly followed the lines of the interim "Askwith" document, was approved.

A report by the Building Committee concerned the ventilation of the council chamber, the lighting of the library, the use of the basement garage, and the letting of accommodation in the Association House.

FIRST MEETING OF NEW COUNCIL

A short formal meeting of the new Council was held on July 25, at the termination of the Annual Representative Meeting. Dr. H. Guy Dain was unanimously and with acclamation elected Chairman of Council for a further term.

New members of Council were welcomed. They were Sir Hugh Lett (President, *ex officio*), Mr. Lawrence Abel and Dr. W. D. Steel (elected by the Representative Body), Dr. Mary Esslemont and Dr. H. M. Golding (elected by Branches in Great Britain), Dr. J. H. Anderson, Dr. P. T. O'Farrell, Dr. Harper Nelson, and Mr. A. E. Porritt (elected by Branches outside Great Britain), and Surgeon Rear-Admiral W. H. Edgar (on recommendation of Council, to represent Royal Naval Medical Service).

The following Special Committees were reappointed: Protection of Practices, Compensation and Superannuation, Medical Curriculum, Public Relations, Rehabilitation, International Relations, Building, Parliamentary Elections, General Medical Council, Films in Medical Education, Ex-Service Practitioners, and Psychiatry and the Law. The committees on the relationship of the Association and the British Medical Bureau, on the Care of Children, and on the Treatment of Children under the Education Act, having completed their reference, were discharged. The Council also reappointed its members on the Joint Committee of the Association and the Trades Union Congress, the Joint Committee of the Association and the Pharmaceutical Society, and the Liaison Committee of the Association and the Royal College of Nursing. The nine practitioners representing the Association (in addition to the officers and chairmen of standing committees) on the Central Medical War Committee were nominated, and the Council confirmed the nomination of Dr. F. Gray and Dr. E. A. Gregg as representatives of the Association on the Council of the Society of Medical Officers of Health.

Following the approval of the interim agreement on the salaries of whole-time medical officers, it was intimated that it would be necessary to re-establish the Joint Advisory Committee set up under the original memorandum. This committee, although consisting predominantly of whole-time medical officers of health, has always had at least two practitioners from other fields, and indeed the spokesmen from the professional side of the committee (which is a joint committee with the associations of local authorities) have invariably been members who were not whole-time medical officers. Five names had been suggested from the public health side, and the Council nominated in addition Dr. J. W. Bone, Dr. F. Gray, and the Secretary.

The Council considered the date on which to hold a special meeting to consider the National Health Service Bill in its final form, the views of the profession upon it, and the course of future action. The meeting was fixed provisionally for October 9.

Correspondence

Delayed Release of Specialists

SIR,—You are probably weary of reading letters from disgruntled doctors in the Services. Perhaps you regard them as a collection of hysterical individuals who have lost all sense of proportion. Perhaps, Sir, you are right. But we did not start off our Service careers with those neurotic fixations and phobias. They have developed as a reaction—in many cases the only available reaction—to the irrationality and caprice of Service policies.

At the moment there can be few groups, anywhere in the world, of people of such a grade of intelligence and such training who demonstrate the phenomenon of mass anxiety to so marked an extent as the collection of specialists in the Forces whose Age and Service Groups lie between 35 and 50. They are penalized (the word is just) for being, in some cases, a bit more clever than the average and, in all cases, for having worked at their own job a bit harder than the average. And the form of the penalty is particularly malevolent—they are not to be allowed to do the work for which they are best suited. G.D.M.O.s may go, but specialists must remain and do the G.D.M.O.s' work—there being in most cases no work in their own specialty. Or, even worse, they are to stay and be company officers, part-time registrars, and general "stooges."

Our fault is, of course, that there are too few of us and our combined votes would be of little value in even a single

constituency. We can therefore, being numerically negligible, be ignored by the politicians—national and medical. Such pleas as we make that our services are no longer required (and your correspondence columns show that that is at least a fairly general opinion among us) can accordingly be treated with contemptuous silence or by vague references to national as against individual needs. Even the most sanguine amongst us now knows that appeals for justice or even to common sense are fruitless. The baffled realization of our impotence aggravates our mental irritation and increases our painful claustrophobia.

I do not expect this letter to have the slightest effect on the rate of release of specialists in the forces. It has, however, had a slight cathartic effect on my own congested cerebrum, and as a purely therapeutic measure has perhaps been worth writing.—I am, etc.,

Secunderabad. D. MACAULAY

SIR,—Stationed as we are, in the Far East, it is some time before we receive copies of medical journals, and we realize that by the time this letter reaches England many other similar ones may already have been published on what is to us the very pressing subject of demobilization of specialists in the R.A.M.C. All we know of the future rate of release of specialists contrasts most unfavourably with the general rate of release throughout the Army, and even with the rate of release of specialists after the last war, when large numbers were retained for indefinite periods after the war ceased.

The War Office announces that for the period July to September, inclusive, part of group 31 to part of group 40 will be released throughout the Army, except in the case of R.A.M.C. specialists, of whom groups 34 and 35 only will be released. Here we would emphasize that we are not asking for the accelerated release of the G.D.O. (group 50 by the end of September), but at the present rate many specialists face the prospect of a further two years' compulsory deferment, despite Mr. Morrison's statement that demobilization will be virtually complete by December 31, 1946. Added to this dismal prospect is the fact that we are not even eligible for L.I.A.P. (Leave In Advance of Python) to U.K. This leave is intended for all those who will have a further four months to serve in their overseas station on their return from U.K.; reckoning on the normal rate of release, only those over group 56 may apply. No allowance is made, however, for the compulsory deferment of specialists, so that a specialist of group 50, with the probability of at least a further eighteen months' service over-seas is still banned from applying for L.I.A.P. The points that we feel should be brought to the notice of the profession are these:

1.—Before the end of the European War an official representative of the E.M.S. stated to M.O.s in France that the release of specialists would be kept up to the standard rate of release throughout the Army by the call-up of civilian specialists. We can only infer that this call-up is not in fact taking place, since the demobilization of specialists is falling so far below the general rate.

2.—On account of the extreme disparity between the rates of release of G.D.O.s and specialists, no G.D.O. now applies for training in any specialty. Further, as a result of this rapid release of G.D.O.s, not only are there no young replacements for specialists forthcoming from within the R.A.M.C. itself, but also specialists are further penalized by having to do their own G.D.O. work on account of the shortage of G.D.O.s. If there is any shortage of doctors in the Far East, it is of R.A.M.C. G.D.O.s rather than specialists.

To sum up, what we ask is that the release rate of specialists be brought into line with age and service group release, and this, we believe, can be implemented by a further call-up of civilian specialists into the R.A.M.C.—We are, etc.,

"SEVEN SPECIALISTS."

The standing committee of the Bristol and District Divisional Hospitals Council at a recent meeting passed a resolution unanimously regretting that "the provisions under the National Health Service Bill for representation on Regional Hospital Boards, hospital management committees, and boards of governors of teaching hospitals do not give local interests the scope necessary to ensure the maximum success of the proposed National Health Service.

H.M. Forces Appointments

ROYAL NAVY

Surg. Cmdrs. C. Keating, M.S.M., and R. C. May, O.B.E., M.C., to be Surg. Capts.

Surg. Cmdr. F. W. A. Fosberry has been placed on the retired list.

Surg. Lieut.-Cmdrs. (Emergency) N. S. Hepburn, J. P. Corcoran, and J. C. Wyatt have been transferred to the Permanent List in the rank of Surg. Lieut.-Cmdrs.

Acting Surg. Lieut.-Cmdrs. (R.N.V.R.) R. S. P. Hawkings and G. A. S. Anthony have been transferred to the R.N. in the rank of Surg. Lieut.-Cmdr. and Surg. Lieut., respectively.

Temp. Surg. Lieuts. (R.N.V.R.) J. T. Morgan, M. P. Glanville, S. G. F. Linton, A. J. Sangster, R. S. McDonald, and A. W. Hagger have been transferred to the R.N. in the rank of Surg. Lieuts.

ROYAL NAVAL VOLUNTEER RESERVE

Surg. Lieut.-Cmdr. R. D. Jenkins to be Surg. Cmdr.

Temp. Surg. Lieut. V. P. McDonagh to be Temp. Surg. Lieut.-Cmdr.

Temp. Acting Surg. Lieut.-Cmdrs. O. G. Lloyd and F. A. Hampton to be Temp. Surg. Lieut.-Cmdrs.

ARMY

Maj.-Gen. G. A. Blake, C.B., K.H.S., late R.A.M.C., has retired on retired pay.

Col. F. S. Irvine, C.M.G., D.S.O., late R.A.M.C., retired and re-employed, to be acting Major-Gen.

ROYAL ARMY MEDICAL CORPS

Lieut.-Col. C. L. Emmerson has retired on retired pay and has been granted the honorary rank of Col.

Lieut.-Cols. E. O. A. Singer and J. D'A. Champney, having attained the age for retirement, are retained on the Active List supernumerary.

Capt. (War Subs. Major) E. H. Evans and Capt. H. A. Bowker have retired and have been granted the honorary rank of Major.

Short Service Commissions.—War Subs. Majors J. J. Sullivan, P. Coleman, and R. G. Davies, Capts. (War Subs. Majors) P. H. Ball and O. W. W. Clarke and Capts. J. B. Plews, K. P. Brown, A. B. Fountain, N. G. G. Talbot, O.B.E., I. A. Walsh, J. H. McLaughlin, J. M. Laferla, F. G. Neild, J. J. McGrath, and A. Grieve, have been appointed to permanent commissions.

Short Service Commissions (Specialist).—To be Capts.: War Subs. Majors A. G. Wright, A. Torrie, and E. H. Larkin; War Subs. Capts. R. T. Wordingham and J. J. Voller; Lieuts. (War Subs. Capts.) R. T. Fletcher and J. C. Scott, from R.A.M.C., Emergency Commissions, and Capt. R. M. Henderson, from R.A.M.C., S.S.

Capts. L. A. S. Edmondson and W. A. Groom have retired.

Capt. A. B. Dick and Lieut. N. G. G. Talbot, O.B.E., from R.A.M.C., T.A., War Subs. Capt. D. L. Scott, Lieuts. (War Subs. Capts.) J. H. McLaughlin, R. G. Boyd, M.C., T. C. R. Archer, J. P. Mitchell, D. Macdonald, and S. H. Roe, from R.A.M.C., Emergency Commissions, and War Subs. Capt. H. A. Ferrante, from Royal Malta Artillery, Emergency Commission, have been granted short service commissions in the rank of Lieut. and to be Capts.

TERRITORIAL ARMY

ROYAL ARMY MEDICAL CORPS

Senior Training Corps.—Major R. J. S. McDowall, supernumerary for service with Birmingham Univ. Senior Training Corps (Med. Unit) has resigned his commission. Lieut. A. S. Davie, supernumerary for service with St. Andrew's Univ. Senior Training Corps (Med. Unit) to be Lieut. Lieut. A. C. Lendrum, supernumerary for service with Glasgow Univ. Senior Training Corps (Med. Unit) has resigned his commission.

LAND FORCES: EMERGENCY COMMISSIONS

ROYAL ARMY MEDICAL CORPS

War Subs. Lieut.-Col. (Local Brig.) A. E. Porritt, C.B.E., has relinquished the appointment of Consultant Surgeon and the local rank of Brig.

War Subs. Capts. R. G. A. Savage, W. E. David, G. A. Fraser, J. W. Anderson, R. P. Seymour, and C. T. Jones have relinquished their commissions, and have been granted the honorary rank of Major.

War Subs. Capts. A. Pearlman, P. X. Bermingham, and M. C. Chapman have relinquished their commissions on account of disability and have been granted the honorary rank of Major.

War Subs. Capts T. A. Cox and D. Whitaker have relinquished their commissions and have been granted the honorary rank of Capt.

War Subs. Capts. W. E. Brigg, W. H. Bennison, G. K. McKee, L. G. Kiloh, and M. J. Pleydell have relinquished their commissions on account of disability and have been granted the honorary rank of Capt.

War Subs. Capts. R. Speier, L. Werbeloff, B. Cimblemann, A. Rusznak, V. Taussig, A. S. Davie, S. Gottlieb, F. Gerstl, I. Frischer, and I. Gordon have relinquished their commissions.

Lieut. L. Chwatt has relinquished his commission.

To be Lieut.: P. E. Baldry (substituted for notification in *London Gazette (Supplement)* dated June 18).

The notification in a *Supplement* to the *London Gazette* dated June 14 regarding War Subs. Capt. W. Edgeworth has been cancelled.

WOMEN'S FORCES

EMPLOYED WITH THE R.A.M.C.

War Subs. Capt. (Mrs.) O. R. Major has relinquished her commission and has been granted the honorary rank of Capt.

War Subs. Capt. (Mrs.) M. Bergman has relinquished her commission.

ROYAL AIR FORCE

Fl. Lieut. R. Mortimer to be Squad. Ldr. (War Subs.).

To be Fl. Lieuts. (Permanent): D. S. Grant, J. S. Howitt, and K. L. G. Nobbs, G.M.

ROYAL AIR FORCE VOLUNTEER RESERVE

Squad. Ldr. (honorary) R. J. Dyson has relinquished his commission on cessation of duty.

To be Squad. Ldrs. (Emergency): C. H. Catlin, M. L. Meade-King, and P. H. Sandifer.

Fl. Lieut. P. M. Peters has relinquished his commission on account of medical unfitness for Air Force service retaining the rank of Squad. Ldr.

To be Fl. Lieuts. (Emergency): P. L. Allen, A. F. Rushforth, J. M. Lipscomb, S. N. Nathan, C. E. Davies, and I. C. Simpson.

To be Flying Officers (Emergency): F. Alberts, G. J. E. Ansell, E. R. Arnold, T. C. G. Barnes, H. S. Bennett, F. M. Benton, J. H. Boydell, R. J. Bruce, I. Butler, H. E. Claremont, N. C. Connell, J. A. Cooney, W. G. C. Craigen, D. S. Cramond, R. Davidson, J. G. Duncan, C. W. Graham-Stewart, R. Horn, D. C. W. Jenkins, P. M. P. Jones, C. R. Kirkpatrick, R. F. Payne, P. A. Reed, D. F. Reynolds, C. G. Roberts, R. Rodger, J. S. T. Searle, A. Sherlock, J. G. Smirk, C. Todd, D. E. Truscott, I. A. Waldie, K. A. A. Wray, E. A. J. Alment, H. F. McG. Bassett, D. E. St. J. Burrowes, D. A. Chandler, D. G. Davidson, R. I. Dixon, D. D. C. Howat, C. R. Neve, R. R. W. Nichols, D. R. L. Peill, J. E. Place, J. M. Pugh, D. H. Sinclair, J. Stevenson, F. N. Valdez, C. W. A. Pullan, G. M. Bailey, R. A. H. Bannatyne, A. F. Bromwich, J. A. Clarke, L. G. G. Davies, D. W. James, E. G. Jenner, G. R. B. McCarter, H. B. Maliphant, A. D. Moffat, S. S. F. Munro, D. A. A. Parker, C. M. Ruben, J. F. Shaw, G. S. Tapsall, P. Vlasto, G. G. Wells, P. W. Wells, and F. R. M. Young.

Association Notices

CONSULTANTS AND SPECIALISTS COMMITTEE

Part-time Consultants and Specialists

Notice is hereby given of the formation by the Council of an electoral roll for the election to the Consultants and Specialists Committee of five representatives of members of the Association who are engaged part-time in consultant and specialist practice. Members of the Association who claim to conform to this definition, including those serving with H.M. Forces, are requested to complete and return the appended form to the Secretary, B.M.A. House, Tavistock Square, London, W.C.1, not later than Monday, Sept. 2, 1946.

CHARLES HILL,
Secretary.

Aug. 3, 1946.

BRITISH MEDICAL ASSOCIATION

CONSULTANTS AND SPECIALISTS COMMITTEE
Part-time Consultants and Specialists

FORM OF APPLICATION FOR INCLUSION IN ELECTORAL ROLL

To the Secretary,
British Medical Association,
B.M.A. House, Tavistock Square,
London, W.C.1.

I wish to apply for inclusion in the electoral roll for the election of representatives of part-time consultants and specialists on the Consultants and Specialists Committee. I am a member of the Association and am engaged part-time in the consultant and specialist practice of.....

Signed.....

Address.....

.....

Date.....

The Katherine Bishop Harman Prize

The Council of the B.M.A. is prepared to consider an award of the Katherine Bishop Harman Prize of the value of £75 in 1947. The purpose of the prize, which was founded in 1926, is to encourage study and research directed to the diminution and avoidance of the risks to health and life that are apt to arise in pregnancy and child-bearing. It will be awarded for the best essay submitted in open competition, competitors being left free to select the work they wish to present, provided this falls within the scope of the prize. Any medical practitioner registered in the British Empire is eligible to compete.

Should the Council of the Association decide that no essay submitted is of sufficient merit, the prize will not be awarded in 1947, but will be offered again in the year next following this decision, and in this event the money value of the prize on the occasion in question will be such proportion of the accumulated income as the Council shall determine. The decision of the Council will be final.

Each essay must be typewritten or printed in the English language, must be distinguished by a motto, and must be accompanied by a sealed envelope marked with the same motto and enclosing the candidate's name and address. Essays must be forwarded so as to reach the Secretary, to whom all inquiries should be addressed, at B.M.A. House, Tavistock Square, London, W.C.1, not later than Dec. 31, 1946.

Diary of Central Meetings

OCTOBER

9. Wed. **Council,** 10 a.m.

POSTGRADUATE NEWS

A series of special Edinburgh postgraduate lectures has been arranged, under the auspices of the Honyman Gillespie Trust, for the summer vacation. The lectures will be held in the West Medical Theatre, Edinburgh Royal Infirmary, on Thursdays, at 4.30 p.m., Aug. 15, 22, and 29, Sept. 12 and 19, and Oct. 3, and are open to all graduates and senior students. Details will be published in the diary column of the *Supplement* week by week.

WEEKLY POSTGRADUATE DIARY

EDINBURGH POSTGRADUATE LECTURES.—At West Medical Theatre, Edinburgh Royal Infirmary, *Thurs.*, 4.30 p.m Dr. J. K. Slater, Trauma as a Cause of Organic and Functional Nervous Disease.

APPOINTMENTS

BIRMINGHAM UNITED HOSPITAL.—Honorary appointments. *Assistant Physicians:* G. S. Hall, M.D., M.R.C.P., C. G. Parsons, M.D., F.R.C.P., C. R. St. Johnston, M.D., M.R.C.P., J. M. Malins, M.B., M.R.C.P. *Assistant Surgeons:* T. S. Donovan, M.Ch.Orth., F.R.C.S., A. L. d'Abreu, Ch.M., F.R.C.S., A. Innes, F.R.C.S., J. Leigh Collis, M.D., F.R.C.S., G. H. Baines, F.R.C.S.

CALEY, IZZA, B.Chir., D.P.H., Deputy Medical Officer of Health, Mansfield.

HAMPSTEAD GENERAL AND NORTH-WEST LONDON HOSPITAL.—*Gynaecologist to Out-patients,* John Howkins, M.D., F.R.C.S., M.R.C.O.G. *Honorary Anaesthetists,* H. Walton, L.R.C.P., M.R.C.S., D.A., G. C. Steel, M.R.C.S., L.R.C.P., D.A. *Ear, Nose, and Throat Surgeon,* E. Oliver Harris, F.R.C.S.

HULL ROYAL INFIRMARY.—Honorary appointments. *Physician:* E. O. Halliwell, M.R.C.P. *Surgeon:* A. Patrick, F.R.C.S.Ed. *Orthopaedic Surgeon:* R. C. Tatham, F.R.C.S. *Ophthalmic Surgeon:* D. D. Stenhouse Stewart, M.R.C.S., L.R.C.P., D.O.M.S. *Gynaecologist:* G. S. Brown, F.R.C.S.Ed. *Pathologist:* N. T. Whitehead, M.B., B.S. *Assistant Surgeons:* J. R. Blackburne, F.R.C.S., and J. I. C. Mason, F.R.C.S. *Assistant Ophthalmic Surgeon:* S. J. H. Miller, M.B., Ch.B., D.O.M.S.

LANCKENAU, N. I., M.D., Physician-in-charge of Physiotherapy Department, Queen Mary's Hospital for the East End, Stratford, E.

WORCESTER ROYAL INFIRMARY.—*Honorary Assistant Surgeon in Ear, Nose, and Throat Department:* I. W. MacGregor, M.B., Ch.B. *Assistant Radiologist:* A. Vickers, M.B., B.S., D.M.R.

BIRTHS, MARRIAGES, AND DEATHS

The charge for an insertion under this head is 10s. 6d. for 18 words or less. Extra words 3s. 6d. for each six or less. Payment should be forwarded with the notice, authenticated by the name and permanent address of the sender, and should reach the Advertisement Manager not later than first post Monday morning.

BIRTHS

GOODWIN.—On July 27, 1946, at the Lindo Wing, St. Mary's Hospital, W.2, to Barbara (*née* Robertson), wife of Dr. J. F. Goodwin, M.D., M.R.C.P., a daughter—Jennifer Jane Blair.

HYLTON.—On July 20, 1946, at Leeds, to Lorna Christine (*née* Petersen), M.R.C.S., wife of W. H. Hylton, M.R.C.S., a daughter.

KWANTES.—On July 31, 1946, at the Maternity Unit, Carmarthen Infirmary, to Catherine Mary Shearn (*née* Griffiths), A.I.H.A., wife of Dr. Willem Kwantes, M.B., B.Chir., a daughter—Shearn Elizabeth.

MARTINEZ-ALONSO.—On July 26, 1946, at Queen Charlotte's Hospital, London, to Ramona, wife of Dr. E. Martinez-Alonso, a daughter—Patricia Ann.

SMITH.—On July 22, 1946, at 18, Colin Gardens, N.W.9, to Betty (*née* Gilbert), wife of Brian J. Douglas Smith, M.B., B.S.Lond., a son—Nicholas.

DEATH

BROWN.—On July 20, 1946, Jane Ann (formerly Sister Johnston, Queens Hospital, Birmingham), beloved wife of Henry Skinner Brown, M.D., Lelant House, Stakeford, Choppington.